## AMENDED IN SENATE MAY 5, 2015 AMENDED IN SENATE APRIL 20, 2015

## SENATE BILL

No. 492

## Introduced by Senator Liu (Principal coauthor: Senator Wolk)

(Principal coauthor: Assembly Member Brown)

February 26, 2015

An act to add Section 14132.279 to the Welfare and Institutions Code, relating to Medi-Cal.

## LEGISLATIVE COUNSEL'S DIGEST

SB 492, as amended, Liu. Coordinated Care Initiative: Consumer Bill of Rights. consumer educational and informational guide.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. One of the methods by which these services are provided is pursuant to contracts with various types of managed care health plans. Existing federal law provides for the federal Medicare Program, which is a public health insurance program for persons 65 years of age and older and specified persons with disabilities who are under 65 years of age.

Existing law, the Coordinated Care Initiative (CCI), requires the department to seek federal approval pursuant to a Medicare or a Medicaid demonstration project or waiver, or a combination thereof, to establish a demonstration project that enables beneficiaries dually eligible for the Medi-Cal program and the Medicare Program to receive

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a continuum of services that maximizes access to, and coordination of, benefits between the programs.

This bill would make legislative findings and declarations relating to the CCI and the availability of consumer protections for beneficiaries. The bill would establish the Coordinated Care Initiative Consumer Bill of Rights, which would set forth rights to which an individual receiving care under the CCI would be entitled, including, but not limited to, rights to self-direction and choice, quality, flexibility, and accessibility of service, cultural competence, and an appropriate grievance and appeals process, as specified. The bill would require the department to make the information available to providers and the public, as specified. require, no later than July 1, 2016, the department to develop and post on the department's Internet Web site, an educational and informational guide to assist consumers and patients in understanding the rights afforded to them under the CCI and how to effectively exercise those rights, as specified. The bill would require the department to distribute the educational and informational guide to specified consumer advocacy groups and programs and, upon request, to all other interested persons.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the 2 following:
- 3 (a) The Coordinated Care Initiative is an innovative health care 4 service delivery model for Californians who are eligible for services 5 under both the Medi-Cal and Medicare programs.
  - (b) Individuals eligible for services under the Coordinated Care Initiative represent a diverse group of older adults and persons with disabilities, and include some of the most vulnerable members of our population.
  - (c) Incorporation of services from two programs required a variety of changes in federal and state law, and complex contractual agreements between the state and the federal Centers for Medicare and Medicaid Services, and between health plans and the various administering state agencies.
  - (d) A key component of the Coordinated Care Initiative is the inclusion of comprehensive beneficiary protections, to ensure that eligible individuals receive appropriate, safe, and high-quality

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care. However, these protections are provided for throughout the various statutes and contractual documents that govern the establishment and operation of the Coordinated Care Initiative.

- (e) It is the intent of the Legislature in enacting this act to recognize the diversity of individuals receiving services under the Coordinated Care Initiative, and encourage implementation of an individualized, person-centered service delivery model. The Coordinated Care Initiative Consumer—Bill of Rights and Patient Educational and Informational Guide is intended to empower beneficiaries to effectively participate in decisions affecting their health care, by consolidating and clarifying providing information regarding the protections afforded to them under the initiative.
- SEC. 2. Section 14132.279 is added to the Welfare and Institutions Code, to read:
- 14132.279. (a) This section shall be known, and may be cited, as the Coordinated Care Initiative Consumer Bill of Rights.
- (b) A consumer under the Coordinated Care Initiative shall have all of the following rights:
- (1) The right to self-direction. The individual shall have the option to coordinate his or her care and services. If due to cognitive impairment the individual is unable to do so, a statutory option should be made available to allow for a surrogate or informal caregiver chosen by the individual to coordinate care.
- (2) The right to choice. Plan networks should ensure that individuals have access to, and choice of, a range of providers and settings across the continuum of care, including health care services, behavioral health services, and long-term services and supports.
- (3) The right to coordination. An individual shall have access to care coordination, in accordance with his or her needs and preferences.
- (4) The right to integration of services. Services shall be delivered to the individual in an integrated manner, regardless of the source of payment.
- (5) The right to flexibility. Services within a plan's contracted services shall meet the individual's changing needs and incorporate new modes of service and supports.
- (6) The right to quality. All services and supports shall be of high quality and shall be person-centered. Statutory standards should be established to provide a mechanism for enforcement.

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(7) The right to cultural competence. Individuals shall have access to threshold language services. Services should be appropriate and responsive to the needs of all populations.

- (8) The right to accessibility. Services and information shall be easy to access. In accordance with the federal Americans with Disabilities Act, services shall be delivered in a manner that is physically, cognitively, and programmatically accessible.
- (9) The right to personal assistants and caregivers. The system of care shall support the role of quality paid and unpaid caregivers, including family caregivers, and shall recognize the importance of workforce development, caregiver needs assessment, and the availability of training.
- (10) The right to independence. Services across the continuum shall support maximum independence, full social integration, and quality of life.
- (11) The right to grievances and appeals. Participants shall have access to an independent grievance and appeals process. Access and resolution shall be prompt, without disruption in service delivery.
- (12) The right to timeliness. All services and supports shall be delivered in a timely manner, in order to ensure the individual's optimal health and functioning.
- (c) The department shall post the Coordinated Care Initiative Consumer Bill of Rights on its Internet Web site, and shall also provide copies to providers and the public upon request. The department shall make the bill of rights available to the public in prevalent languages.
- (d) This section shall be implemented only to the extent permitted by all of the following:
  - (1) Applicable federal Medicare law.
  - (2) Applicable Medi-Cal law.
- (3) The "Memorandum of Understanding (MOU) between the Centers for Medicare and Medicaid Services (CMS) and the State
- 34 of California Regarding A Federal-State Partnership to Test a
- Capitated Financial Alignment Model for Medicare-Medicaid 35
- Enrollees California Demonstration to Integrate Care for Dual 36
- Eligible Beneficiaries." 37
- 38 SEC. 2. Section 14132.279 is added to the Welfare and
- 39 Institutions Code, to read:

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14132.279. (a) This section shall be known, and may be cited, as the Coordinated Care Initiative Consumer and Patient Educational and Informational Guide.

- 4 (b) By July 1, 2016, the department shall develop and post on the department's Internet Web site, an educational and informational guide for consumers and patients about the Coordinated Care Initiative (CCI). In developing the educational and informational guide, the department shall consult with stakeholders. The guide shall describe consumer and patient rights under the CCI, and inform consumers and patients of effective ways to exercise their rights and who to contact for assistance in securing those rights. The guide shall include, but not be limited to, all of the following information:
- 14 (1) How to determine whether a health care provider 15 participates in the CCI.
  - (2) How to file a grievance and appeal.
- 17 (3) How to change health plans.
- 18 (4) How to switch from Cal MediConnect to original Medicare 19 and a Medi-Cal managed care plan.
  - (5) How to obtain assistance in alternative languages.
- 21 (6) The toll-free telephone numbers for the following programs 22 to assist in problem solving:
  - (A) Cal MediConnect's Ombudsperson Program.
  - (B) Medi-Cal Managed Care Ombudsperson Program.
- 25 (C) HMO Help Center, operated by the Department of Managed 26 Health Care.
  - (D) Medicare.

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- 28 (E) Health Care Options.
- 29 (c) (1) The educational and informational guide shall include 30 information for each of the following groups of individuals:
  - (A) Dual eligibles: those individuals who are dually eligible for Medicare and Medi-Cal.
- 33 (B) Seniors and persons with disabilities who are required to 34 receive long-term services and supports through a Medi-Cal 35 managed care plan.
- 36 (2) The department may develop a separate educational and 37 informational guide for each of the groups identified in paragraph 38 (1).

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1 (d) (1) Upon publication, the department shall distribute the 2 educational and informational guide developed pursuant to this 3 section to all of the following organizations:

- 4 (A) Statewide senior advocacy groups.
- 5 (B) Statewide consumer advocacy groups.
- 6 (C) State and local ombudspersons.
- 7 (D) Health consumer centers.
- 8 (E) Health insurance counseling and advocacy programs.
- 9 (2) The educational and informational guide shall be made 10 available upon request to all other interested persons.
- 11 (e) The department shall make the educational and informational 12 guide easy to read and understand and available in all Medi-Cal 13 threshold languages, using an appropriate literacy level and in a 14 culturally competent manner.